

Recommended Guidance for Youth Activities & Day Camps

Updated May 4, 2021

Introduction

Participation in youth activities and day camps is an important part of the growth and development of children and provides both physical and mental health benefits. By their nature, these activities bring together children and adults from different neighborhoods and communities. This can lead to increased risk of COVID-19 spread and introduction or reintroduction of the virus into new areas. While COVID-19 is circulating in the United States, measures need to be taken in order to ensure that activities are conducted in a way that minimizes risk. Some of these activities may be high-risk and can lead to a number of exposures and quarantines.

Recommended Actions

Youth activity organizers and camp administrators can take important steps to help prevent and prepare for cases of COVID-19, including:

- All eligible individuals should be encouraged to get vaccinated prior to the start of camp. Getting vaccinated is an important way for camp operators, staff, and participants to keep from getting and spreading COVID-19. For additional information on recommendations for individuals who are fully vaccinated, please visit the CDC's [Interim Public Health Recommendations for Fully Vaccinated People](#).
- Make tests available for children and staff – CDH has access to VAULT tests, which are free, saliva-based PCR tests. Results are typically available within 48-hours. To request VAULT tests for your youth activity or day camp, contact Kristi Allen at Kallen@cdh.idaho.gov.
- Establish effective communication plans to stay in regular communication with all parents, youth, and staff. Your plan should ensure that all of your communications are culturally and linguistically sensible and accessible for children and families you serve.
 - Inform all parents and staff about steps everyone can take to prevent exposure and further spread. Update your organization/facility's preparedness plans.
 - Inform parents and staff about updates and/or changes to your policies or operations.
- Modify drop-off and pick-up procedures. Consider staggering arrival and drop off times and/or have staff come outside the facility to pick up the children as they arrive.

- Ask campers and staff to complete daily symptom screenings before arrival. For additional information on the symptoms of COVID-19, please visit the CDC's [Symptoms of COVID-19](#) resource page.
 - If the parent thinks the child is sick, you should encourage them to keep their child home and call their healthcare provider.
- Establish an illness policy for children and staff at your facility if you do not already have one.
 - Encourage parents and staff to strictly follow your facility's illness policy and stay home when sick.
 - Establish a daily process for identifying and sending home children and staff who become sick.
 - If children and staff are exhibiting any concerning symptoms, you should use your illness policy to determine if they should stay home.
 - Separate sick children and staff from others until they can go home. When feasible, identify a "sick room" through which others do not regularly pass.
- Limit group sizes as much as possible and choose activities that encourage more physical space between campers.
 - If possible, activities should include the same group each day, and the same staff should remain with the same group each day. Limit mixing between these cohorts or "pods."
 - Cohorting campers and staff should not replace other prevention measures including masking and sanitization.
- Develop a physical distancing policy with visual reminders for campers and staff. Promote physical distancing of:
 - At least 3 feet between all campers and staff within a cohort*
 - At least 6 feet between all campers and staff outside of their cohort
 - At least 6 feet while eating and drinking, including among people within the same cohort

*The guidance for contact tracing remains at 6 feet of physical distancing. Campers and staff who have been in close contact of less than 6 feet for 15 minutes or more, should be considered a close contact and follow [quarantine protocols](#).
- Daily activities and curriculum should support social distancing.
 - Eliminate large group activities
 - Limit the number of children in each program space
 - Increase distance between children during activities

- Plan activities that do not require close physical contact between multiple children
 - Limit item sharing: If items must be shared, remind children to wash their hands or not to touch their faces after using these items
 - Minimize time standing in lines and take steps to ensure that distance between the children is maintained
 - Incorporate additional outside time and consider measures that will increase air ventilation
- Provide outdoor activities when possible, with no more than one group of children in one outside area at a time.
 - Note that if your outdoor area is enclosed/not accessible to the public, you can use the outdoor play equipment, but it should be wiped down between groups of children if possible.
- Stagger meal and snack times. Eliminate family-style meals or shared food and follow physical distancing during mealtimes. Provide bagged or individual lunches and snacks.
- Increase the frequency of cleaning, sanitizing, and disinfecting of your facility. Chlorine-based sanitizers are known to be most effective against viruses and bacteria.
- Staff are encouraged to implement cleaning, sanitizing, and disinfecting practices in high touch areas.
- Teach children/youth and staff to wash hands often with soap and water for at least 20 seconds.
 - If soap and water are not available, use alcohol-based hand sanitizer (60% alcohol).
 - Encourage hand washing by children and staff through education, scheduled time for handwashing, and the provision of adequate supplies.
- Use “respiratory etiquette.” Cover your cough or sneeze with a tissue.
 - See [CDC’s Cover Your Cough page](#) for more information.
 - Post signs. Signs should be highly visible and remind staff, visitors, and students to perform hand hygiene, sneeze/cough into their elbow, put used tissue in a waste receptacle, and to wash hands immediately after using tissue.
 - Provide adequate supplies within easy reach, including tissues and no-touch trashcans.
 - Recommend everyone to avoid close greetings like hugs or handshakes.
- Recommend that everyone follow current guidelines regarding mask wearing.
 - Follow any local orders or [public health advisories](#) that may be in place.
 - CDC recommends that everyone 2 years and older should wear a cloth face covering over their nose and mouth when in a community setting.

- This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other everyday preventive actions.
- When you wear a mask, you protect others as well as yourself. Masks work best when everyone wears one.
- Transportation
 - Design camp activities to limit or eliminate group transportation (large vans, buses)
 - Carpooling and rideshares should be discouraged
 - Sanitize or wash all passengers' hands before boarding
 - Encourage face coverings due to close proximity
 - Space riders as far apart as possible
 - If multiple doors (side door and rear entry door), use one as entrance and one as exit
 - Whenever possible, keep windows down for increased ventilation
 - Routinely clean and disinfect high-touch surfaces

Youth or Employee Being Tested for COVID-19 or Has Symptoms but is not Tested

- Any child/youth or employee being tested for COVID-19 should not be in the facility and should be isolated at home while waiting for test results.
- If the test result is negative or testing was not done, the child or employee should stay home until fever has been gone for 2 days and symptoms improve.
- Youth and staff in a household with someone being tested for COVID-19 or who has symptoms but has not been tested should also stay home.

Individual with Lab-Confirmed COVID-19

- Send child or staff member home, if not already isolated – a designated on-site location should be set aside for sick individuals to isolate while they wait to be picked up.
- Designated staff should contact CDH to report the case.
- Begin contact tracing. More information on contact tracing can be found [here](#).
- Use your established communication plan to share timely information with staff and families.
- If you cannot confirm that 6-feet distancing was consistently maintained during the day, recommend quarantine for close contacts.
- Notify exposed contacts to initiate quarantine period.

- **Cleaning:** It is recommended to close off areas used by the ill employee or child and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets.
 - Open outside doors and windows to increase air circulation in the area.

People with COVID-19 who have stayed home (home isolated) can stop home isolation under the following conditions:

- People will not have a test to determine if they are still contagious. They will be cleared to return to work after these three things have happened:
 - They have had no fever for at least 24 hours (that is one full days of no fever without the use medicine that reduces fevers), AND
 - Other symptoms have improved (for example, when their cough or shortness of breath have improved), AND
 - At least 10 days have passed since symptoms first appeared

Potential Exposure to Lab-Confirmed COVID-19

- If an individual at your facility thinks they have been exposed to someone with laboratory-confirmed COVID-19 or a probable case, follow the steps below to monitor their health and avoid spreading the illness to others if they get sick.
- You generally need to be in close contact with a sick person to get infected. Close contact includes:
 - Living in the same household as a sick person with COVID-19
 - Caring for a sick person with COVID-19
 - Being within 6 feet of a sick person with COVID-19 for 15 minutes over a 24-hour period, or
 - Being in direct contact with secretions from a sick person with COVID-19 (e.g., being coughed on, kissing, sharing utensils, etc.).
 - People who have been in close contact with a person who is sick from COVID-19 should stay home for 10-14 days since the last day of contact with the infected individual and monitor their health. Individuals may be released from quarantine early with a negative PCR test, taken 5 days after exposure. If the individual tests negative on day 5 or later they can end quarantine after day 7 following the exposure.
 - If an individual has not been in close contact with a sick person with COVID-19, they should monitor their health for 10-14 days since the last day of contact with the infected individual. Their risk of becoming ill is lower than for someone who has had close contact.

- If an individual gets sick with fever, cough, or shortness of breath (even if symptoms are very mild), they should contact their healthcare provider. They will evaluate symptoms, determine if testing is warranted, and instruct on care, self-observation and/or isolation.

Reporting COVID-19 Exposures and Confirmed Cases Associated with Your Program

- You should report if you have any staff or families exposed, or determined to be infected with COVID-19. Please call the CDH Call Center at 208-321-2222 for all reporting needs. The CDH Call Center is open Monday through Friday from 8:30 am to 4:30 pm. If it is closed, you may leave a message for CDH staff.

Resources

[ACN Coronavirus COVID-19 Considerations for Camps](#)

[ACA COVID-19 – Resource Center for Camps](#)

[CDH Coronavirus Monitoring](#)

[IDHW Protocol for Stage 1 – Youth Activities](#)

[IDHW Resources for the Novel Coronavirus](#)

[Environmental Cleaning & Disinfection Recommendations](#)

[How & When to Wash Your Hands](#)

[Higher Risk Populations](#)

[Printable Resources](#)

CDH Call Center (208-321-2222 M-F 8:30-4:30)

Sources:

CDC, Coronavirus Disease 2019 (COVID-19), <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html>